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**\*BIBDATASHEET\***

CONFIRMATION NO. 8000

Bib Data Sheet

|                                    |   |                     |                               |   |
|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>09/779,381 | <b>FILING OR 371(c)<br/>DATE</b><br>02/07/2001<br><b>RULE</b> | <b>CLASS</b><br>370 | <b>GROUP ART UNIT</b><br>2662 | <b>ATTORNEY<br/>DOCKET NO.</b><br>AZA-001/2001-P001 |
|------------------------------------|---|---------------------|-------------------------------|---|

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 09/528,802 03/20/2000  
 and is a CIP of 09/539,479 03/30/2000 ABN  
 and is a CIP of 09/539,306 03/30/2000  
 and is a CIP of 09/539,478 03/30/2000 PAT 6,751,214  
 and is a CIP of 09/539,461 03/30/2000  
 and is a CIP of 09/539,476 03/30/2000 PAT 6,810,039  
 and is a CIP of 09/539,477 03/30/2000 PAT 6,751,224

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 04/02/2001**

|  |                                   |                                  |                              |                                    |
|--|-----------------------------------|----------------------------------|------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>CA | <b>SHEETS<br/>DRAWING</b><br>254 | <b>TOTAL<br/>CLAIMS</b><br>8 | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                                  |                              |                                    |
| Verified and Acknowledged  | Examiner's Signature              | Initials                         |                              |                                    |

**ADDRESS**

000293

**TITLE**

Configurable Packet and Cell Format Data Processor

|                                       |   |  |
|---------------------------------------|---|--|
| <b>FILING FEE<br/>RECEIVED</b><br>710 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                       |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                       |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                       |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
|                                       |   | <input type="checkbox"/> Other _____                           |

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